

NPDES Permit No. IL0072877

Notice No. IL0072877-15.TTL

Public Notice Beginning Date: **July 15, 2015**

Public Notice Ending Date: **August 14, 2015**

National Pollutant Discharge Elimination System (NPDES)  
Permit Program

PUBLIC NOTICE/FACT SHEET  
of  
Draft Reissued NPDES Permit to Discharge into Waters of the State

Public Notice/Fact Sheet Issued By:

Illinois EPA  
Division of Water Pollution Control  
Permit Section  
1021 North Grand Avenue East  
Post Office Box 19276  
Springfield, Illinois 62794-9276  
217/782-0610

Name and Address of Permittee:

Illinois Department of Natural Resources  
One Natural Resources Way  
Springfield, Illinois 62702

Name and Address of Facility:

Moraine View State Park-STP  
27374 Moraine View Road  
LeRoy, Illinois 61752  
(McLean County)

The Illinois Environmental Protection Agency (IEPA) has made a tentative determination to issue a NPDES Permit to discharge into the waters of the state and has prepared a draft Permit and associated fact sheet for the above named Permittee. The Public Notice period will begin and end on the dates indicated in the heading of this Public Notice/Fact Sheet. All comments on the draft Permit and requests for hearing must be received by the IEPA by U.S. Mail, carrier mail or hand delivered by the Public Notice Ending Date. Interested persons are invited to submit written comments on the draft Permit to the IEPA at the above address. Commentors shall provide his or her name and address and the nature of the issues proposed to be raised and the evidence proposed to be presented with regards to those issues. Commentors may include a request for public hearing. Persons submitting comments and/or requests for public hearing shall also send a copy of such comments or requests to the Permit applicant. The NPDES Permit and notice numbers must appear on each comment page.

The application, engineer's review notes including load limit calculations, Public Notice/Fact Sheet, draft Permit, comments received, and other documents are available for inspection and may be copied at the IEPA between 9:30 a.m. and 3:30 p.m. Monday through Friday when scheduled by the interested person.

If written comments or requests indicate a significant degree of public interest in the draft Permit, the permitting authority may, at its discretion, hold a public hearing. Public notice will be given 45 days before any public hearing. Response to comments will be provided when the final Permit is issued. For further information, please call Todd Lamm at 217/782-0610.

The following water quality and effluent standards and limitations were applied to the discharge:

Title 35: Environmental Protection, Subtitle C: Water Pollution, Chapter I: Pollution Control Board and the Clean Water Act were applied in determining the applicable standards, limitations and conditions contained in the draft Permit.

The applicant is engaged in treating domestic wastewater for Moraine View State Park.

The length of the Permit is approximately 5 years.

The main discharge number is 001. The seven day once in ten year low flow (7Q10) of the receiving stream, unnamed tributary to North Fork Salt Creek is 0 cfs.

The design average flow (DAF) for the facility is 0.021 million gallons per day (MGD) and the design maximum flow (DMF) for the facility is .0525 MGD. Treatment consists of stabilization ponds, rock filter, and discharge to surface water.

This reissued Permit does not increase the facility's DAF, DMF, concentration limits, and/or load limits.

Pursuant to the waiver provisions authorized by 40 CFR Section 123.24, this draft permit is within the class, type, and size for which the Regional Administrator, Region V, has waived his right to review, object, or comment on this draft permit action.

Application is made for the existing discharge which is located in McLean County, Illinois. The following information identifies the discharge point, receiving stream and stream classifications:

| <u>Discharge<br/>Number</u> | <u>Receiving Stream</u>                       | <u>Latitude</u>   | <u>Longitude</u> | <u>Stream<br/>Classification</u> | <u>Integrity<br/>Rating</u> |
|-----------------------------|---|-------------------|------------------|----------------------------------|-----------------------------|
| 001                         | Unnamed Tributary to North<br>Fork Salt Creek | 40° 24' 24" North | 88° 43' 46" West | General Use                      | Not Rated                   |

To assist you further in identifying the location of the discharge(s) please see the attached map.

The stream segment, which has no segment designation, receiving the discharge from outfall 001 is not on the Draft 2014 303(d) list of impaired waters.

The discharge(s) from the facility is (are) proposed to be monitored and limited at all times as follows:

Discharge Number(s) and Name(s): STP Outfall 001

Load limits computed based on a design average flow (DAF) of 0.021 MGD (design maximum flow (DMF) of .0525 MGD).

The effluent of the above discharge(s) shall be monitored and limited at all times as follows:

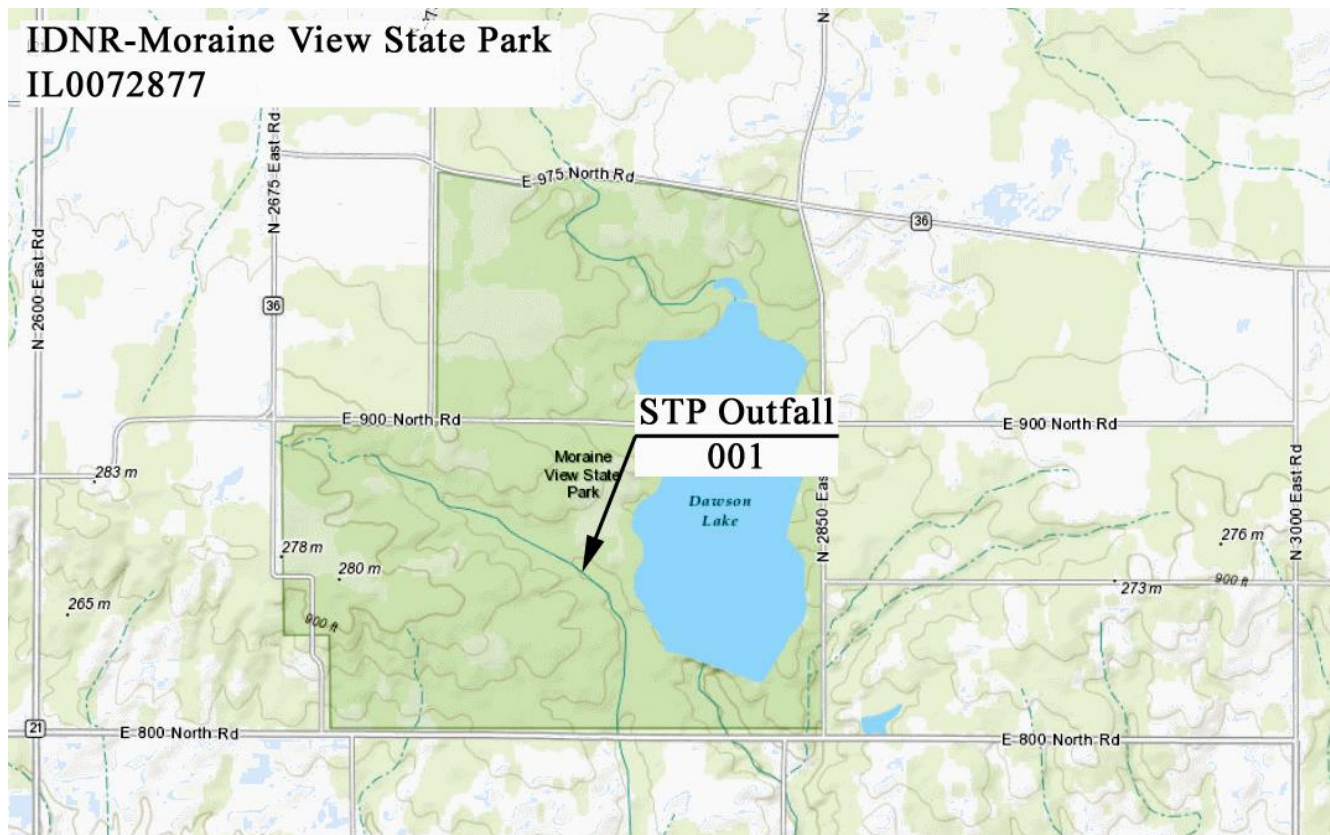
|                                | LOAD LIMITS lbs/day<br>DAF (DMF)*              |                   |                  | CONCENTRATION<br>LIMITS mg/L     |                                 |                  |                                  |
|--------------------------------|--|-------------------|------------------|----------------------------------|---------------------------------|------------------|----------------------------------|
| Parameter                      | Monthly<br>Average                             | Weekly<br>Average | Daily<br>Maximum | Monthly<br>Average               | Weekly<br>Average               | Daily<br>Maximum | Regulation                       |
| CBOD <sub>5</sub>              | 4.4 (11)                                       | 7.0 (18)          |                  | 25                               | 40                              |                  | 35 IAC 304.120<br>40 CFR 133.102 |
| Suspended Solids               | 6.5 (16)                                       | 7.9 (20)          |                  | 37                               | 45                              |                  | 35 IAC 304.120<br>40 CFR 133.102 |
| pH                             | Shall be in the range of 6 to 9 Standard Units |                   |                  |                                  |                                 |                  | 35 IAC 304.125                   |
| Fecal Coliform                 | ***See Below                                   |                   |                  |                                  |                                 |                  | 35 IAC 304.121                   |
| Chlorine Residual              |  |                   |                  |                                  |                                 | 0.05             | 35 IAC 302.208                   |
| Ammonia Nitrogen:              | Monitor Only                                   |                   |                  |                                  |                                 |                  | 35 IAC 309.146                   |
|                                |  |                   |                  | Monthly<br>Avg. not<br>less than | Weekly<br>Avg. not<br>less than | Daily<br>Minimum |                                  |
| Dissolved Oxygen<br>March-July |  |                   |                  | NA                               | 6.0                             | 5.0              | 35 IAC 302.206                   |
| August-February                |  |                   |                  | 5.5                              | 4.0                             | 3.5              |                                  |

\*Load Limits are calculated by using the formula:  $8.34 \times (\text{Design Average and/or Maximum Flow in MGD}) \times (\text{Applicable Concentration in mg/L})$ .

\*\*\*Fecal Coliform shall not exceed a geometric mean of 200 cfu/100 ml nor exceed a daily maximum value of  $1.59 \times 10^8$  cfu/day for May through October, nor shall more than 10% of the samples during any 30 day period exceed 400 cfu/100 ml.

This draft Permit also contains the following requirements as special conditions:

1. Reopening of this Permit to include different final effluent limitations.
2. Operation of the facility by or under the supervision of a certified operator.
3. Submission of the operational data in a specified form and at a required frequency at any time during the effective term of this Permit.
4. More frequent monitoring requirement without Public Notice in the event of operational, maintenance or other problems resulting in possible effluent deterioration.
5. Prohibition against causing or contributing to violations of water quality standards.
6. Recording the monitoring results on Discharge Monitoring Report Forms using one such form for each outfall each month and submitting the forms to IEPA each month.
7. Effluent sampling point location.
8. Provisions of 40 CFR Section 122.41 (m) & (n).
9. At minimum of 85% removal of CBOD5 and suspended solids.
10. A requirement to monitor and a limit of 0.05 mg/L for residual chlorine when it is used.
11. Compliance Schedule to construct disinfection equipment.



NPDES Permit No. IL0072877

Illinois Environmental Protection Agency

Division of Water Pollution Control

1021 North Grand Avenue East

Post Office Box 19276

Springfield, Illinois 62794-9276

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

Reissued (NPDES) Permit

Expiration Date:

Issue Date:

Effective Date:

Name and Address of Permittee:

Illinois Department of Natural Resources  
One Natural Resources Way  
Springfield, Illinois 62702

Facility Name and Address:

Moraine View State Park-STP  
27374 Moraine View Road  
LeRoy, Illinois 61752  
(McLean County)

Receiving Waters: Unnamed Tributary to North Fork Salt Creek

In compliance with the provisions of the Illinois Environmental Protection Act, Title 35 of the Ill. Adm. Code, Subtitle C, Chapter I, and the Clean Water Act (CWA), the above-named Permittee is hereby authorized to discharge at the above location to the above-named receiving stream in accordance with the standard conditions and attachments herein.

Permittee is not authorized to discharge after the above expiration date. In order to receive authorization to discharge beyond the expiration date, the Permittee shall submit the proper application as required by the Illinois Environmental Protection Agency (IEPA) not later than 180 days prior to the expiration date.

Alan Keller, P.E.  
Manager, Permit Section  
Division of Water Pollution Control

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## NPDES Permit No. IL0072877

Effluent Limitations, Monitoring, and Reporting

## FINAL

Discharge Number(s) and Name(s): STP Outfall 001

Load limits computed based on a design average flow (DAF) of 0.021 MGD (design maximum flow (DMF) of .0525 MGD).

From the effective date of this Permit until the expiration date, the effluent of the above discharge(s) shall be monitored and limited at all times as follows:

|                                | LOAD LIMITS lbs/day<br>DAF (DMF)*              |                           |                          | CONCENTRATION<br>LIMITS mg/L           |                                       |                          |                             |                        |
|--------------------------------|--|---------------------------|--------------------------|--|---------------------------------------|--------------------------|-----------------------------|------------------------|
| <u>Parameter</u>               | <u>Monthly<br/>Average</u>                     | <u>Weekly<br/>Average</u> | <u>Daily<br/>Maximum</u> | <u>Monthly<br/>Average</u>             | <u>Weekly<br/>Average</u>             | <u>Daily<br/>Maximum</u> | <u>Sample<br/>Frequency</u> | <u>Sample<br/>Type</u> |
| Flow (MGD)                     |  |                           |                          |  |                                       |                          | Continuous                  |                        |
| CBOD <sub>5</sub> **           | 4.4 (11)                                       | 7.0 (18)                  |                          | 25                                     | 40                                    |                          | 1 Day/Month                 | Composite              |
| Suspended Solids               | 6.5 (16)                                       | 7.9 (20)                  |                          | 37                                     | 45                                    |                          | 1 Day/Month                 | Composite              |
| pH                             | Shall be in the range of 6 to 9 Standard Units |                           |                          |  |                                       |                          | 1 Day/Month                 | Grab                   |
| Fecal Coliform                 | ***See Below                                   |                           |                          |  |                                       |                          | 1 Day/Month                 | Grab                   |
| Chlorine Residual              |  |                           |                          |  |                                       | 0.05                     | 1 Day/Month                 | Grab                   |
| Ammonia Nitrogen:<br>(as N)    | Monitor Only                                   |                           |                          |  |                                       |                          | 1 Day/Month                 | Composite              |
|                                |  |                           |                          | Monthly<br>Average<br>not less<br>than | Weekly<br>Average<br>not less<br>than | Daily<br>Minimum         |                             |                        |
| Dissolved Oxygen<br>March-July |  |                           |                          | NA                                     | 6.0                                   | 5.0                      | 1 Day/Month                 | Grab                   |
| August-February                |  |                           |                          | 5.5                                    | 4.0                                   | 3.5                      | 1 Day/Month                 | Grab                   |

\*Load limits based on design maximum flow shall apply only when flow exceeds design average flow.

\*\*Carbonaceous BOD<sub>5</sub> (CBOD<sub>5</sub>) testing shall be in accordance with 40 CFR 136.\*\*\* Fecal Coliform shall not exceed a geometric mean of 200 cfu/100 ml nor exceed a daily maximum value of  $1.59 \times 10^8$  cfu/day for May through October, nor shall more than 10% of the samples during any 30 day period exceed 400 cfu/100 ml.

\*\*\*\*See Special Condition 10.

Flow shall be reported on the Discharge Monitoring Report (DMR) as monthly average and daily maximum.

Fecal Coliform shall be reported on the DMR as a daily maximum value.

pH shall be reported on the DMR as minimum and maximum value.

Chlorine Residual shall be reported on DMR as daily maximum value.

Dissolved oxygen shall be reported on the DMR as a minimum value.

## NPDES Permit No. IL0072877

Influent Monitoring, and Reporting

The influent to the plant shall be monitored as follows:

| <u>Parameter</u> | <u>Sample Frequency</u> | <u>Sample Type</u> |
|------------------|-------------------------|--------------------|
| Flow (MGD)       | Continuous              |                    |
| BOD <sub>5</sub> | 1 Day/Month             | Composite          |
| Suspended Solids | 1 Day/Month             | Composite          |

Influent samples shall be taken at a point representative of the influent.

Flow (MGD) shall be reported on the Discharge Monitoring Report (DMR) as monthly average and daily maximum.

BOD<sub>5</sub> and Suspended Solids shall be reported on the DMR as a monthly average concentration.

Special Conditions

SPECIAL CONDITION 1: This Permit may be modified to include different final effluent limitations or requirements which are consistent with applicable laws and regulations. The IEPA will public notice the permit modification.

SPECIAL CONDITION 2: The use or operation of this facility shall be by or under the supervision of a Certified Class 4 operator.

SPECIAL CONDITION 3: The IEPA may request in writing submittal of operational information in a specified form and at a required frequency at any time during the effective period of this Permit.

SPECIAL CONDITION 4: The IEPA may request more frequent monitoring by permit modification pursuant to 40 CFR Section 122.63 and Without Public Notice.

SPECIAL CONDITION 5: The effluent, alone or in combination with other sources, shall not cause a violation of any applicable water quality standard outlined in 35 Ill. Adm. Code 302.

SPECIAL CONDITION 6: The Permittee shall record monitoring results on Discharge Monitoring Report (DMR) Forms using one such form for each outfall each month.

In the event that an outfall does not discharge during a monthly reporting period, the DMR Form shall be submitted with no discharge indicated.

The Permittee may choose to submit electronic DMRs (NetDMRs) instead of mailing paper DMRs to the IEPA. More information, including registration information for the NetDMR program, can be obtained on the IEPA website, <http://www.epa.state.il.us/water/net-dmr/index.html>.

The completed Discharge Monitoring Report forms shall be submitted to IEPA no later than the 25th day of the following month, unless otherwise specified by the permitting authority.

Permittees not using NetDMRs shall mail Discharge Monitoring Reports with an original signature to the IEPA at the following address:

Illinois Environmental Protection Agency  
Division of Water Pollution Control  
Attention: Compliance Assurance Section, Mail Code # 19  
1021 North Grand Avenue East  
Post Office Box 19276  
Springfield, Illinois 62794-9276

SPECIAL CONDITION 7: Samples taken in compliance with the effluent monitoring requirements shall be taken at a point representative of the discharge, but prior to entry into the receiving stream.

SPECIAL CONDITION 8: The provisions of 40 CFR Section 122.41(m) & (n) are incorporated herein by reference.

SPECIAL CONDITION 9: BOD<sub>5</sub> and Suspended Solids (85% removal required) For Discharge No. 001: In accordance with 40 CFR 133, the 30-day average percent removal shall not be less than 85 percent except as provided in Sections 133.103 and 133.105. The percent removal need not be reported to the IEPA on DMRs but influent and effluent data must be available, as required elsewhere in this Permit, for IEPA inspection and review. For measuring compliance with this requirement, 5 mg/L shall be added to the effluent CBOD<sub>5</sub> concentration to determine the effluent BOD<sub>5</sub> concentration.

Percent removal is a percentage expression of the removal efficiency across a treatment plant for a given pollutant parameter, as determined from the 30-day average values of the raw wastewater influent concentrations to the facility and the 30-day average values of the effluent pollutant concentrations for a given time period.

SPECIAL CONDITION 10: Fecal Coliform limits for Discharge Number 001 are effective May thru October. Sampling of Fecal Coliform is only required during this time period.

The total residual chlorine limit is applicable at all times. If the Permittee is chlorinating for any purpose during the months of November through April, sampling is required on a daily grab basis. Sampling frequency for the months of May through October shall be as indicated on effluent limitations, monitoring and reporting page of this Permit.



Special ConditionsSPECIAL CONDITION 11.

## Schedule of Compliance with Final Effluent Limitations

Project Description: Installation and Operation of Disinfection Equipment

The Permittee shall achieve compliance with the final effluent limitations as specified in this Permit for Discharge Number(s) 001 by completion of the project described above in accordance with the following compliance schedule:

| <u>ITEM</u>   | <u>COMPLETION DATE</u> |
|---|------------------------|
| Submit Plans, Specifications and Construction Permit Application. | 8/2015                 |
| Advertise for Bids  | 11/2015                |
| Receive Bids  | 12/2015                |
| Award Construction Contract                                       | 1/2016                 |
| Complete Construction/ Initiate Operation                         | 7/2016                 |

This Permit may be modified, with Public Notice, to include revised compliance dates set out in this Permit.

In addition, the IEPA may initiate a modification of the compliance schedule set out in this Permit at any time, to include other dates which are necessary to carry out the provisions of the Illinois Environmental Protection Act, the Federal Clean Water Act or regulations promulgated under those Acts. Public Notice of such modification and opportunity for public hearing shall be provided.

Reporting

The Permittee shall submit a report no later than fourteen (14) days following the completion dates indicated for each lettered item in the compliance schedule, indicating, a) the date the item was completed, or b) that the item was not completed. All reports shall be submitted to IEPA at the following address:

Illinois Environmental Protection Agency  
Division of Water Pollution Control  
Attention: Compliance Assurance Section, Mail Code #19  
1021 North Grand Avenue East  
P.O. Box 19276  
Springfield, Illinois 62794-9276